

**ASSEMBLY BILL**

**No. 1142**

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**Introduced by Assembly Member Price**

February 27, 2009

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An act to amend Section 14018.2 of the Welfare and Institutions Code, relating to Medi-Cal.

LEGISLATIVE COUNSEL'S DIGEST

AB 1142, as introduced, Price. Medi-Cal: proof of eligibility.

Existing law establishes the Medi-Cal program, which is administered by the State Department of Health Care Services and under which qualified low-income persons receive health care services. Existing law provides that it is the responsibility of the Medi-Cal beneficiary to provide information and evidence of Medi-Cal eligibility to that person's health care provider if that information is requested by the provider prior to rendering services to that beneficiary.

Existing law provides that it is the responsibility of the provider prior to rendering Medi-Cal reimbursable services to persons presenting themselves as Medi-Cal beneficiaries to make a good faith effort to verify the person's identity, if the person is not known to the provider, otherwise payment for those services may later be disallowed by the department.

This bill would provide that it is the responsibility of a hospital, as soon as proof of Medi-Cal eligibility is supplied by a person presenting himself or herself as a Medi-Cal beneficiary, to provide all information regarding that person's Medi-Cal eligibility to all other providers that bill separately for services rendered to that person during the same time period for which the hospital is submitting a claim.

Vote: majority. Appropriation: no. Fiscal committee: yes.  
State-mandated local program: no.

*The people of the State of California do enact as follows:*

1     SECTION 1. Section 14018.2 of the Welfare and Institutions  
2     Code is amended to read:  
3     14018.2. (a) Reimbursement shall not be denied to any  
4     qualified health care provider for care rendered to an eligible  
5     Medi-Cal beneficiary for the sole reason that a proof of eligibility  
6     label does not accompany the bill.  
7     Proof of eligibility labels may, however, continue to be used as  
8     such and shall be made available to an eligible Medi-Cal  
9     beneficiary through the local office which has determined the  
10    person's eligibility or through the department. The provider may  
11    submit machine-reproduced copies of the beneficiary Medi-Cal  
12    card for billing purposes as long as the copy is made from the  
13    original unaltered Medi-Cal card under circumstances controlled  
14    by the provider, for example, on the premises of the provider with  
15    copying equipment controlled by the provider.  
16    (b) It shall remain the responsibility of a Medi-Cal beneficiary  
17    to provide information and evidence of Medi-Cal eligibility,  
18    restrictions on the eligibility, and non-Medi-Cal health coverage,  
19    to that person's health care providers, if this information is  
20    requested by those providers prior to rendering services to that  
21    beneficiary.  
22    (c) It shall be the responsibility of the provider prior to rendering  
23    Medi-Cal reimbursable services to persons presenting themselves  
24    as Medi-Cal beneficiaries to make a good faith effort to verify the  
25    person's identity, if the person is not known to the provider, by  
26    matching the name and signature on his or her Medi-Cal card  
27    against the signature on a valid California driver's license, or  
28    California identification card issued by the Department of Motor  
29    Vehicles, or another type of picture identification card or other  
30    credible document of identification. When the provider verifies  
31    the beneficiary's identity with a signed Medi-Cal card and one of  
32    the documents described above, the state will deem this to be a  
33    good faith effort. If the provider does not make a good faith effort  
34    of reasonable identification prior to rendering Medi-Cal  
35    reimbursable services and renders services to a presenting person

1 who is ineligible for those Medi-Cal services, payment for those  
2 services may later be disallowed.

3 This provision shall not apply to:

4 (1) Persons 17 years of age and under.

5 (2) Persons in long-term care.

6 (3) Persons receiving emergency services.

7 (d) Notwithstanding subdivision (b) of this section, county  
8 welfare departments may provide Medi-Cal eligibility information  
9 to other governmental agencies and their designated agents as  
10 necessary for proper administration of the Medi-Cal program.

11 *(e) It shall be the responsibility of a hospital, as soon as proof*  
12 *of Medi-Cal eligibility is supplied by a person presenting himself*  
13 *or herself as a Medi-Cal beneficiary, to provide all information*  
14 *regarding that person's Medi-Cal eligibility to all other providers*  
15 *that bill separately for services rendered to that person during the*  
16 *same time period for which the hospital is submitting a claim.*